

Annual Storage Facility Self-Evaluation Form USDA Commodity Foods

DATE: _____

A. Facility Review

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|--|-----|--------------------------|----|--------------------------|
| 1. Does storage space appear to be adequate? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Is storage space in good repair? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Is food stacked to permit easy identification? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Is food stacked off the floor on pallets for proper ventilation and easy inventory? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Are out-of-condition foods stored separately? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 6. Is food stacked to prevent damage from excess weight to bottom layers? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 7. Are foods stored separately from pesticides, herbicides, cleaning supplies and other materials that could contaminate foods in storage? | | <input type="checkbox"/> | | <input type="checkbox"/> |
| 8. Are safeguards taken to prevent theft? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 9. Is the storage area maintained in a way that prevents accidents? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 10. Is the storage area free from rodent, bird, insect, and other animal infestation? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 11. Do you contract for pest control services? If so, frequency? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 12. Are required local/state health inspection certificates and inspection sheets current and on file? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

B. Inventory and Records Review

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|--|-----|--------------------------|----|--------------------------|
| 1. Is the warehouse utilizing food on first-in, first-out basis? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Does the warehouse maintain an inventory system? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Are signed Bills of Lading for commodity deliveries current and on file? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Are signed Bills of Lading for commodity deliveries faxed to the State office in a timely manner? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Are temperature logs of all food storage areas current and on file? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

C. Temperature Control Review

- | | | | | |
|--|-----|--------------------------|----|--------------------------|
| 1. Are daily temperature readings recorded for all storage facilities? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Are dry storage areas maintained between 50°F and 70°F? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Are refrigerated storage areas maintained at a temperature between 32°F and 45°F? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Are the freezer storage areas at a temperature of 0°F or below? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Are all perishable items stored at the temperature listed on the commodity case? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

South Dakota Department of Education
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Phone: 605-773-3413 Fax: 605-773-6846

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Comments			
I hereby certify that all of the information, to the best of my knowledge, is true and correct.			
Signature:		Date:	
DO NOT mail to State Office. Keep on file for State Office Review			
FOR STATE USE DURING REVIEW			
Approved	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Corrective Action Required	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Signature:		Date:	